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DIABETES.—POST-MORTEM EXAMINATION.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I received the following case from my friend Dr. Gilman Davis, of Portland, Me. Will you be kind enough to insert it in your Journal, and oblige your friend,
H. I. BOWDITCH.

The patient was a boy of 4 years of age. The parents were healthy ; but lost their only other child some time since with "scrofula," as they informed me. The subject of the present examination was a healthy babe ; but the mother was unable to nurse him, and he was in consequence confided to the care of a wet nurse, who was confined a year previous to her taking this child. About two years since the child was troubled with all the symptoms of scrofulous disease of the hip-joint, for which he was put under the care of a physician. Shortly after this, two or three tumors appeared on the scalp ; one of them, on the back of the head, suppurated, and the matter was discharged. Soon after (about 18 months since) they first noticed that the child was excessively thirsty, and passed much more urine than natural ; the appetite, however, being good, and the bowels, as they think, not out of order.

This state of things has been gradually progressing until I first saw the child, which was a week before his death. At this time the child had all the looks of old age. On the head were patches of squamous eruption, like tinea ; the face perfectly blanched, except for a slightly yellowish tinge, and entirely exsanguine ; the teeth were all black and decayed ; the tongue was natural enough. The most remarkable feature, however, was the eyes. Both protruded entirely out of the socket, and seemed to be retained by the lids only with difficulty. One, the left, had actually escaped from the lids and "laid upon the cheek," a few days before my visit, and was replaced by the mother herself. When the lids closed, so far as they could, the effect of the closure upon the ball of the eye, as in the healthy eye, was beautifully shown. The lids were transparent, and the dark iris was as clearly seen as if through a watch glass, the cornea being midway in the upper lid. The whole skin was parched and dry as could be, with scaly eruptions on various parts of the body. The belly was greatly tympanitic, giving a drum-like resonance on percussion, and

the whole muscular system atrophied; the skin loose and shrivelled upon the limbs. The feet were anasaruous slightly, and as white as the purest wax-work, and, together with the hands, resembling wax-work more nearly than I have ever before seen. The child breathed with difficulty, and coughed a little. I attempted to examine the chest, but the child was so extremely irritable that I gave it up. The mother carefully measured the urine, which averaged a quart per hour during the day, and she thought it must be nearly as much during the night. I took some of the urine home with me. It was perfectly limpid. I tasted it carefully, but could not perceive the least sweetness; and then tested it with yeast, raising the temperature gradually to 80 deg. Fabr., but without any fermentation. This, however, it must be remembered, was but a week before the child's death. The bowels were acting well enough. The thirst was constant, and the child would at times drink a quart of water, without taking the vessel from his lips. He died quietly.

I made the examination thirty-six hours *post mortem*. The hands and feet preserved their wax-like whiteness—the feet still anasaruous. On cutting through the scalp and reflecting it, there appeared on the periosteum several patches, the largest over the left parietal bone, of a substance which I considered strumous deposition, or crude tuberculous matter. These corresponded with the situations of the previous external tumors. On raising the sawn portion of the skull, which was strongly retained by adhesions at the posterior part, the dura mater exhibited several patches precisely similar to those on the pericranium; and on the occiput, in the place of the abscess which had burst, the bone was entirely wanting for a space the size of a ninepence, which was filled up by membrane. The dura mater along the longitudinal sinus, and especially on the back part of the head, was exceedingly hypertrophied, being from one fourth to one fifth of an inch in thickness. I could not find any tubercles in the membranes or in the sinus. The arachnoid was clear and slightly distended with serum. The brain was natural, with a little fluid in the ventricles. It was with the greatest difficulty that I could separate the anterior portion of the brain from the bone—it being firmly attached by its thickened membrane. Over the right orbit the bone was in part absorbed, leaving a jagged edge, with a thick mass of strumous deposit (similar to that on the pericranium and dura mater) in its place and around for the space of a square inch. The dura mater here was immensely thickened, tough as cartilage, and only separated from the bone by great effort. The left orbital plate was not apparently injured, but the dura mater was firmly attached round it, and thickened as on the other side. The optic nerves were atrophied and flat, feeling very much like an empty artery when pressed between the fingers. The orbital plates of left side I removed as much as was removed by absorption on the right side, when the orbits were found to be completely filled by the thickened membrane—a perfect cartilaginous-like mass, pushing the eye beyond the outer orbital edge. I did not make any further examination of the eyes, as I was requested to disfigure the face as little as possible.

The lungs were firmly adherent to chest all round, with thickened

pleuræ, and the same strumous deposition in patches between the pleura costalis and pulmonalis. There were no tubercles in the membranes or in the lungs, though I looked carefully for them. The pleuræ beneath the sternum and the pericardium were one third of an inch thick, and, like the other affected membranes, feeling and cutting like cartilage. The lungs appeared to be carnified—looking precisely like raw beef, without the slightest crepitus. The lobes of the lungs were firmly adherent; the interlobular membrane being one third of an inch thick. The bronchial glands I carefully examined—but they seemed unaltered. The heart was pale and flabby, but without any structural alteration. There was nothing observable about the diaphragm. The liver was perhaps larger than natural at that age—its ligaments, capsule of Glisson, &c., not altered; the gall-bladder was half full of healthy bile. The spleen natural. The pancreas about two thirds of its natural size, and indurated, cutting like the pleura. The stomach large, flabby and blanched, but not otherwise altered; peritoneum without tubercles or any appreciable alteration; mesenteric glands unaffected. The kidneys large and pale, but without any organic disease; the ureters largely distended, sufficiently so to admit a finger easily; the bladder was unaltered. The bowels I did not think it important to examine.

Notwithstanding the entire absence of tubercles and the unaltered state of the glandular system, I cannot doubt that the disease was scrofula, and I use the term in its broadest sense. I am the more confirmed in this belief from the fact that the family physician, Dr. Cummings, together with his father, both gentlemen of great experience, who attended the child when it first began to show signs of disease, pronounced that disease scrofulous. And I suppose the constitutional affection to have been engendered by giving the child breast-milk not sufficiently nutritive for its support. It left the mother a healthy infant, and returned from the nurse puny and sickly. I have searched in vain for any description of a similar alteration of the membranes, and send you the account in the belief that you will be interested in it.

I may mention here that I could not learn that the child had ever had any enlargement of the glands in the neck, groin, &c.

That there should have been such freedom from pain in the head, and no disturbance of the intellect, seems to me remarkable. During the first month or two of its sickness, it would sometimes cry out suddenly with pain in its head, but there was no complaint latterly. The child was bright and intelligent, though very fractious.

I am also struck with the perfectness of its sight to the last, considering the flattened and atrophied condition of the optic nerves and the filling of the orbit by adventitious structure, and consequent protrusion of the eye. Yet after the eye had actually escaped from between the lids, and had been replaced, to test the sight a pin was held up to him, which he saw and took at once. The child walked about till a day or two before its death.

In regard to the diabetes, my imperfect examination of the urine will allow me to say but little. I did not detect sugar—but there still might

have been some, and it might have been diminished at the late period when I first saw the child. At any rate, there was no organic renal disease, and my own belief, from all the symptoms is, that it was a true case of diabetes mellitus—and that in this and in other cases the disease is, as Dr. Barlow and others have stated, owing to a deficiency in the assimilating powers of the stomach, by which a lower organic product, sugar, is taken into the system, in place of a higher organic product, albumen.

REMARKS ON THE PATHOLOGY OF DRUNKENNESS, WITH PARTICULAR REFERENCE TO DR. SEWALL'S PLATES.—NO. II.

*[Communicated for the Boston Medical and Surgical Journal.—Continued from page 255.]

In the discussion which has been elicited by the plates of Dr. Sewall, the opinion has been advanced with great confidence, if not with all the weight which professional distinction usually confers, that the stimulus of alcoholic drinks, when taken in moderation, contributes to health, by exciting that degree of action in the stomach, which is essential to the due discharge of the digestive function. In this opinion I believe Professor Hun, of Albany, stands alone; for though popular customs may possibly be founded on, if they do not give countenance to such a belief, it is very certain that no other man of science of modern days has maintained such a heresy. *Alcohol* necessary to health! Why then does it not distil from the clouds, or bubble up from the caverns of mother earth, or flow in streams and rivers, or spread forth in lakes and oceans? Why was not man's physical organization adapted to such an agent? his stomach and digestive tube of brass or steel (the real "*dura ilia*" of the *Saturnian era*)? and his other organs of equally *non-impressible* materials? Such a position is too absurd for argument—too ridiculous for even grave discussion—for though there may be now and then a Jack Falstaff ready to exclaim, "Had I a thousand sons, the first human principle I would teach them should be to forswear thin potations, and to addict themselves to sack" (*Henry IV., Act 4*), we should search in vain for a real physiologist, who is willing to risk his reputation in the advocacy of such a doctrine. We have seen nothing on this point deserving of serious notice; but to the *opinion* of one young man we may oppose that of the profession generally, as embodied in the following remarks of the learned Dr. Trotter—"Natural appetite requires no alcoholic stimulants. Human blood and healthful chyle do not acknowledge alcohol to be an ingredient in their composition. The nature of the human stomach cannot accommodate itself to ardent spirit, and dyspeptic symptoms are the early signs of its being hurtful. The mucous, villous and muscular coats, the gastric and mucous follicles of the stomach, instead of feeling it necessary for their functions, by every repetition of the draught, resist it the more, till at last digestion is overcome, fixed disease takes place in these organs, and the fibres become hard and insensible."—*Trotter on Drunkenness*, page 177.

In our preceding article, we endeavored to show that Dr. Sewall's plates of 1, the *Healthy Stomach*, and 2, *The Stomach of the Temperate Drinker*, were substantially correct, and that no criticisms yet brought to bear against them are entitled to any weight. The most, indeed, that has been urged against the latter, amounts only to this, that the same appearances are produced by *other* causes. Granted; and what then? It certainly does not follow that the plate is not correct, for this is virtually admitted, and moreover in admitting that the capillary vessels of the stomach are injected during the act of healthy digestion, caused by the presence of ordinary food, it by no means follows that their *pathological* condition is identical. Dr. Hun, indeed, assumes the point which remains to be proved, when he says that "the effects produced by food and by alcoholic drinks are perfectly physiological, and that there is no reason to say that the one is more healthy than the other." Now, it would be just as true and rational to say, that as the skin is injected with blood in *erysipelas*, *scarlet fever*, *blushing*, &c., therefore all these pathological states are "*physiological*" and identical, and all "equally healthy." Would Dr. H. call an injection of the mucous membrane of the stomach by a solution of *arsenic*, *corrosive sublimate*, or any other acrid mineral or vegetable poison, *physiological*, and similar to that caused by the digestion of bland food? But we have abundant proof that alcohol is as much a *non-natural*, or poison, as either, and they may all be taken "in moderation," with about equal impunity. The error consists in regarding alcohol as belonging to the *materia alimentaria*, as a *nutrient*, and then reasoning from this false assumption; whereas, it is purely a narcotico-acrid stimulant, producing a local irritation in the gastro-intestinal mucous membrane, leading, with inevitable certainty, to a pathological condition of the parts with which it comes in contact, awakening numerous sympathies, by an excitement far transcending the healthy standard; and eventually terminating in lesions incompatible with normal functions, or even the continuance of life. We are told, indeed, that "the *abuse* of an organ causes disease, proportioned to the degree of abuse;" but ought not *all* use of such an agent *in health*, to be considered as an abuse?—or at least as much so as that of opium, arsenic, strychnine, or any other poisonous drug? It is an easy thing to say that the excitement caused by alcoholic drinks is a healthy excitement, but it is not so easy a matter to prove it. Let Dr. H. draw that intangible, evanescent, and ever-changing line, which separates the moderate use of such an article from its abuse, and we will give him credit for the accomplishment of a task, which has hitherto baffled greater men than he. "There is," says he, "undoubtedly a gradation of disease produced by alcoholic drinks, but the gradation commences not with the temperate use of these drinks, but with the abuse of them." Again, he remarks, "So long as the person avoids *excess*, there will be no disease." This is a pure assumption, without a single fact or observation to support it. How does Dr. H. know that there is no disease, or, that it does not correspond in degree to the amount of alcohol habitually taken into the stomach? The statements of Dr. H., unlike those of Dr. Sewall, are neither founded in rea-

son nor observation, and consequently have no scientific value whatever. Apart from the support derived from the chemical fact, mentioned in our last article, namely, that alcohol has so powerful an attraction for water, as to exert a corrosive influence upon the soft mucous membrane with which it comes in contact, thus modifying and eventually destroying its incurvation, on which its healthy functions depend, pathology has revealed to us such a multitude of facts which go to disprove the position of Dr. H., it would really seem that no one, unless under the influence of the mocker itself, could arrive at the conclusion that alcohol and food rank in the same class, and exert the same physiological effects upon the animal economy. We dwell the longer on this point, because it is a doctrine which commends itself to popular favor, and which needs not the plausible, albeit delusive arguments of scientific men to give it currency.

In endeavoring, moreover, to support the position that alcohol does not exert a deleterious influence upon the gastric mucous membrane, when used "habitually" but "temperately," Dr. Hun has involved himself in many palpable contradictions. To prove the proposition, he says that it is necessary to show, "from positive observations, that the stomach of the temperate drinker presents a morbid appearance after death, not found in abstinence men." But after admitting that alcohol does cause an injection of the mucous membrane, he remarks that this increased vascularity is "transient, and does not remain after death." Hence, he very logically infers that there has been no increased vascularity, which he had already admitted, or, if there had been, it did not amount to disease, because there were no vestiges of it after dissolution! Now, in our former article, we stated as the result of numerous observations, made under favorable circumstances, during a period of sixteen years, that in a majority of cases of what are usually termed temperate drinkers, increased vascularity of the stomach does exist after death; we endeavored to show that its *absence* did not necessarily disprove its existence during life. And yet Dr. H., after conceding the same, quotes this very fact to prove that there never has been any, and insists upon it that the stomach of the temperate drinker should always "present a morbid appearance after death, not found in abstinence men." We can scarcely believe that such reasoning as this, can justify the habitual use of alcoholic drinks, though we are aware how little show of reason suffices to justify a custom, supported by prescription, animal appetite, and perchance the example of the reputed wise and good. As Dr. H., however, is not the only person who has relied upon the occasional absence of vascularity of the gastric mucous membrane after death, to prove that it did not exist during life, we shall quote a few authorities. "In animals killed by alcohol," says Dr. Christison, "Orfila says he found the villous coat of the stomach of a cherry-red color. I have several times remarked the same appearance. When the stomach was empty, before the alcohol was introduced, I have always found the prominent part of its rugæ of a deep cherry-red tint, the margin of the patches being of a more florid hue, and evidently consisting of a minute net-work of vessels. In

man, these signs of irritation have not been always observed. In the patient who died in the Infirmary here, the stomach was quite natural in appearance."—(*Christison on Poisons.*) Professor Horner remarks that "The most extreme irritations of the stomach may exist during life and may even be fatal, but yet not be manifested after death, by unusual redness of the tissues affected. It would indeed be unphilosophical, and inconsistent with pathological observations on other parts, to expect from the stomach an invariable manifestation of disease, by redness and injection of its mucous surface after death. Let the redness of the skin in erysipelas be ever so strong during life, it frequently disappears wholly, by the retreat of the blood from the capillaries, after death. Measles are similar in this respect, and the fact already mentioned is very worthy of attention, that if a fine injection be thrown into a subject who has died at the height of the eruption, the vessels originally dilated by the irritation, manifest themselves by the greater quantity of injecting matter they receive; or, in other words, the eruption may be renewed after death, as I have satisfactorily ascertained by experiment. If any conjecture can be hazarded on these points, we are disposed to believe that during the process of death, the vitality of parts in a state of inflammation is frequently so far diminished, that they no longer have the power of attracting the fluids in undue quantity to them; consequently their redness disappears."—(*Pathological Anatomy*, page 162.) Bichat, Broussais, Abercrombie, and many other able pathologists, maintain the same doctrine, and support it by a variety of facts, gathered from their own observation; and yet we admit, that unless properly guarded and explained, it is a doctrine easily susceptible of perversion and misconstruction, and in the hands of the ignorant, or the reckless, may lead to dangerous consequences in pathology. After death from cholera, in which during life there was unquestionably extreme congestion of the vessels of the gastro-enteric membrane, it was not uncommon to find a perfectly blanched appearance, with scarcely a vestige of vascularity remaining. We have even noticed the same after death from an excessive dose of arsenic, causing symptoms very analogous to those of an aggravated case of cholera. These cases, however, constitute exceptions to the general rule. In persons who have made an habitual, albeit temperate, use of distilled alcoholic liquors, we do find more or less injection of the mucous coat of the stomach, the appearances varying according to the *grade of irritation* to which the organ has been subjected. Where the quantity of alcohol habitually taken has been comparatively small, say from one to three wine-glasses of brandy or wine daily, we find, especially on holding up the stomach to the light, a distinct arborescent appearance of the vessels, branching forth in every direction, over the gastric mucous membrane, as we see over the sclerotic coat of the eye in cases of severe ophthalmia. This appearance is apt to be overlooked by a careless observer, particularly if the precaution is not used of placing the stomach between the observer and the light, when the beautiful net-work of vessels is distinctly visible. It is unnecessary to say that no such appearances exist in a healthy stomach, or, which is tantamount, the stomach of the

total abstinent. Frequently, we find conjoined with this injection a softening of the mucous tissue, or even a deposition of lymph upon its surface, indicating a higher grade of inflammatory irritation than that which results in simple congestion. If the cause be withheld, which produced this pathological condition, the vessels contract, and the membrane assumes again its former healthy aspect. Fortunate, indeed, are those, who pause in their destructive course, before the irritation set up has been so long continued, or become so intense, as to produce organic lesions, which neither time nor the recuperative powers of nature can repair!

In cases where the stomach has been subjected to a higher grade of irritation, by the ingestion of a still larger quantity of alcoholic drink, we find a *capilliform* injection of the same membrane; the vessels being larger and more distinct, and forming a more palpable net-work. Here the morbid changes are so perceptible, as to be easily discerned on laying open the stomach and emptying it of its contents, without resorting to the means alluded to in the former instance. In this grade of disease, moreover, we observe that the subjacent cellular tissue is always more or less softened—slight maceration being sufficient for its complete removal. I would call this the stomach of the *toper*, the man who is not ashamed to ask for a glass of brandy and water, and who calls in the aid of Bacchus to "warm" him, to "cool" him, to give him an appetite, to cause him to sleep, and to minister to his "often infirmities." Could such a person see himself as the pathologist sees him, he would find that his stomach had already passed the first stage of disorganization, and was rapidly tending to that point, where the vital process, exhausted by long resistance, and fruitless warfare, would yield the battle, and succumb beneath the death-dealing potion. And yet this man will quote Dr. Hun to prove that the excitement of alcohol is a healthy excitement, and wonderfully conservative and conducive to health; or, to quote Dr. H.'s own language, that "his stomach is in a state of excitement which is not only compatible with health, but is absolutely necessary to the preservation of health"! In many of these cases of respectable but confirmed toppers, and even of those who make less frequent use of alcoholic drinks, we find occasionally a *speckled* appearance of the mucous membrane, such as may be seen figured in Dr. Gross's Pathological Anatomy (Plate I., figure 5), and which may be imitated very closely "by scattering fine grains of powdered vermilion upon a moist sheet of white paper."—(*Andral.*) This appearance is owing to a slight extravasation of blood, caused by a rupture of some of the minute capillary vessels. These specks may be conjoined with diffused redness, or with softening; they may be isolated and distinct, or confluent; giving to the membrane a streaked or striated appearance.

The next grade of diseased action caused by alcoholic drinks, would lead us to a consideration of Dr. Sewall's admirable Plate of the Drunkard's Stomach, but we shall leave this for the subject of our next number. In the mean time we beg to enter our most earnest protest against the doctrine of Professor Hun, as laid down in the following extract from one of his communications to the Albany Evening Journal:—"One who uses

alcoholic drinks with moderation, will feel an excitement under their influence which will not exceed the limits of health, and will leave no physical derangement behind it"!! Here is the same blending, and confounding of natural and artificial stimulants, which we have already noticed, and which is certainly remarkable in one who professes to teach the laws which regulate the animal economy. We suppose it to be an established doctrine that every organ has its appropriate stimulus; that light is the proper stimulus to the eye, sound to the ear, and food to the stomach, and that the excitement caused by the appropriate stimulus, when confined within normal limits, is not only pleasurable, but conducive to health. That alcohol instead of food is the natural stimulus of the stomach, we don't believe is yet quite established, though we shall think it highly probable, when it can be shown that the eye is not only adapted to light, but to sound, the ear also to both, or even that the stomach is as well adapted by its organization to digest alcohol, as the gizzard of the fowl or the ostrich is to grind up gravel stones. The unconsciousness of having a stomach at all, has been laid down by physiologists and writers on dietetics as the grand criterion of health and healthy digestion; and the dyspeptic, who feels in the epigastric region more than he can well describe, would doubtless yield assent to the truth of the doctrine, even in case Dr. H. should protest, that this increased sensibility is nothing more nor less than "healthy excitement" powerfully conservative, "and leaves no physical derangement behind it." He may well pray to be delivered from the pleasure of "feeling the excitement," caused even by the presence of ordinary food, and be willing to exchange this blissful state for a more passive and negative condition, when the digestive process sends no intelligence to the brain, nor the brain any messengers to its outposts. If he recurs to the past, he doubtless may recollect the time, when he was wont to "feel the excitement" of alcohol, causing a very perceptible, if not pleasurable, sensation of warmth in the neighborhood of the lunar ganglion, "firing up," to use an engineer's phrase, an organ, as well adapted to the application of such a stimulus, as a powder magazine for fire; rousing the whole organic system of nerves, and awakening a thousand sympathies, all centreing in the brain, and hence reflected to every part of the system. The unnatural excitement caused by an artificial stimulant, is now produced by a natural one, food—and the dyspeptic is paying the penalty of believing in the physiological, pathological, moral and physical heresy, that artificial "stimulants are absolutely necessary for the preservation of health." The true doctrine has been well laid down by Dr. James Johnson, in his "Essay on Indigestion," where speaking of the use of alcoholic liquors, he remarks: "The final result will be the same, irritability, or morbid sensibility. If the excitement be pleasurable, as from wine, we are *spoiling* the stomach, as we spoil a child by indulgence; we are *educating* the organ improperly, and laying the foundation for morbid irritability. On the other hand, if what we take into the stomach induce disagreeable sensations there, we are then offering a violence to the organ which will very soon terminate in disease, or, more properly speaking, the natural excita-

bility of the stomach is already changed into morbid sensibility, and disorder has actually commenced." If Dr. Hun can produce any respectable authority in favor of his doctrine, that a person may safely indulge in alcoholic drinks, to the extent of "feeling" a pleasurable "excitement" under their use, we shall "feel" under great obligation to him, and shall accord him a higher niche in the schools of modern scientific medicine, than we are now disposed to do. By the way, if Dr. H. will brush up his anatomical knowledge, he may possibly find an anatomical fact in explanation of the reason, which he seems unable to divine, why alcohol, if so injurious to the stomach, does not cause in that organ the same painful sensation as when applied to the eye! Is it not possible that the manner in which they are respectively supplied with nervous influence has something to do in the matter? In conclusion, we beg to commend to Dr. H.'s attention, as well as those who think as he does on this subject, the following judicious remarks of the late excellent Professor Oliver:—

"What should we think of the prudence of frequently applying to a healthy eye, pepper, vinegar, camphorated spirit, or any other irritating fluid, which would affect it in the manner just described? Suppose the eye could be made the seat of a certain artificial appetite for such irritations, and could be gratified by the application of them, what language should we think would sufficiently express the folly or madness of that man who deliberately set about creating such an appetite in his eye, by the frequent application of these stimulants? Should we not expect, as a matter of course, that this tender organ, subjected to such unnatural excitement, would, at length, be thrown into a state of permanent irritation, which, in the form of inflammation, would, in the end, disorganize and destroy it. This is precisely the character of that practice so prevalent among mankind, particularly the civilized portion of it, of swallowing a variety of irritating substances, solid and fluid, to stimulate the stomach. The inevitable effect of these is, to produce a state of irritation of the organ, more or less permanent, according to the degree and frequency of the stimulation, which, in the form of chronic inflammation, gives rise to the most obstinate dyspepsias, and, in certain habits, leads to incurable and fatal disorganization in the stomach. The only difference between the two cases is, that the eye is not naturally the seat of any appetite except for its proper stimulus, *light*. But neither is the stomach *naturally* the seat of any appetite for stimulating substances. The artificial appetite which we can create in the one organ, is just as unnatural as that which, fortunately, we cannot create in the other. I say *fortunately*, because there can be no doubt that if any poison existed in nature by which an artificial appetite could be created in the eye for stimulating substances, the perverse ingenuity of man would long since have found it out, and it would be quite as common to meet people with inflamed, disorganized and blind eyes, as it is now to see them, some, with impaired, small, croaking and snuffling voices, trembling hands and dizzy heads, from the practice of stuffing a poisonous powder into the nostrils; and others tortured and groaning with the pangs of diseased and

ruined stomachs, shattered nerves and ruined health, from the practice, equally *rational*, of loading their stomachs with a variety of stimulating substances. These are the effects of stimulants upon the parts to which they are applied. They increase and precipitate all the vital functions of the part, and they produce a condition of its nerves and bloodvessels very similar to that which exists in disease—that is, irritation of its nerves, and an increased quantity of blood in its vessels; a condition, which, if frequently renewed, cannot fail of becoming permanent, and in the end of producing disease.”

MEDICAL PRACTICE IN THE SOUTH WEST.

[Communicated for the Boston Medical and Surgical Journal.—Continued from page 295.]

I WILL now give you a list of the most regular rates of charging, and such as can be collected by the slow and uncertain process of law. We are seldom paid for our services when rendered, and it is not considered due until the following January; that is, we make out our accounts and settle up but once a year. Accounts bear interest from the first of January until paid.

Prescription, venesection, and extracting teeth,	-	\$1,00	each
Cupping and leeching,	-	2,00	"
Preparing and administering dose of medicine, not less than	50		
Travel per mile,	per day,	1,00	
"	nocte	2,00	
Town visit, or call while in the country,	-	1,00	
Detention over one hour, charged at the rate of	-	1,00	per hour
Night detention,	-	2,00	"
Consultation fee,	-	from 10,00 to 20,00	
Attendance on obstetric cases,	-	" 10,00 to 25,00	
Important surgical operations,	-	50,00	
Minor,	"	5,00 to 20,00	
Setting fractured bones, and reducing dislocations of			
the larger bones,	-	15,00 to 25,00	
Dressing wounds,	-	2,00 to 5,00	
Attendance on surgical the same as in other cases.			

It is not very uncommon to make a special contract for the operation and subsequent treatment in surgical cases. The above list of charges is subject to great variation by different practitioners in different localities. City or town charges are generally somewhat greater than in the country. But the fees as they are put down are such as have been collected in this county, by process of law.

The credit system in medicine is a bad one, and often gives dissatisfaction. An open medical account for twelve months often amounts to a much larger sum than was anticipated. Consequently a larger draw is made on the pocket; whereas if the same amount had been disbursed at several successive periods, while the services were fresh in the memory, and grati-

tude was in lively exercise, it would have caused no disagreeable feelings. We are compelled to make uniform charges upon all or hear complaints. Some, of course, are not able to pay, and must be set down as gratuitous; but many others, who are at the time in circumstances to pay, become insolvent, and thus we lose hundreds and thousands of dollars, and years of professional toil. We are thus disappointed in regard to our income, and our benevolent or gratuitous services. No party is benefited by the credit system; but each sustains an injury. Perhaps I would come nearer the truth by saying that from one fourth to one third of our annual charges are never realized, than by fixing it at any other proportion, though in some cases it is much beyond that limit, and in others something less.

City or town practice does not differ materially from the like practice in the Atlantic cities, except that a part of the patients are colored servants, and the general remarks that follow have reference to the slave population, living on plantations, which constitute a majority of our country patients. The simple manner in which they live, the regularity of their employment in the open air, the free and unrestrained manner of dressing, all exert a favorable influence upon health; and when attacked with disease, it is more simple and less complicated, and yields more readily and with more certainty to the influence of the remedies employed for its cure; thus upon the whole our success is greatest among the colored population, *ceteris paribus*. Notwithstanding their regimen and habits are for the most part good, yet the want of cleanliness and comfortable quarters frequently does much injury, both of which they could remedy, as they have the power; but as a class they are so indolent and indifferent to personal comfort or utility, when left to themselves, that they make little or no provision in these particulars.

It is not uncommon to be called to cases of feigned sickness, or, as it is termed here, *opossoming cases*; therefore the physician has to be on the alert, or by the cries and groans and false statements of the patient he may be deceived; but bearing this in mind, he is in little danger of being deceived or of making any serious errors in his prescriptions. But in this manner they deceive their overseers or masters, and avoid their regular work for weeks and perhaps months together. A large proportion of the cases the physician is called to prescribe for, have been treated more or less, according to the confidence possessed by those who have charge of them, with *mineral* or *botanical* practice, or a combination of both as they may happen to have a partiality. Therefore, as we have to meet protracted disease, often made worse by the worst empiricism, it is not surprising that we should often fail of success; but so far as I am able to determine, we have a less number of fatal cases occurring from acute, chronic and febrile diseases, in the same number of patients, than in the N. E. States. I do not here speak of epidemics, which occasionally prevail in certain localities, and which, perhaps, in the course of a few months may nearly depopulate the places of its visitation. C. S. MAGOUN.

Woodville, Mi., April 20th, 1843.

(To be continued.)

MUSCULAR ACTION.—EXAMINATION OF DR. BROWN'S REPLY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In your Journal of April 26, I noticed the reply of Dr. J. B. Brown to my critique on a previous article of his, which excited much amusement, and not a little surprise at his gross mistakes, and erroneous representations, but especially at his attempt at ridicule, which was paying me a compliment greater than his highest praise could bestow; for when an opponent resorts to this method, it shows conclusively that he has nothing better to offer, and thus indirectly yields the argument.

His first attack is upon the physiological fact of limiting the sphere of muscular action; he denies the principle, and then asserts that it cannot be done without producing paralysis, and converting the muscle to matter nearly resembling jelly. In making these assertions he shuts his eyes, and loses sight of the arguments presented by me; makes representations to suit himself, and then quarrels with them. The principle I advanced was, that if a muscle or group of muscles were confined in their action to certain limits for a length of time, they would retain that degree of action unless altered by force. This he denies, and asserts that they would immediately resume their former position when the force confining them should be removed. His assertions on this point do not accord with my instructions when a student of medicine, nor with all my experience since I have practised surgery, nor with well-established facts. I was much surprised that a medical man should gravely put forth such a declaration. I feel humbled to find, at this period of physiological knowledge, so gross an error in a medical man, when so many facts in the practice of every practical surgeon almost daily prove the falsity of the doctor's position. If his position was true, all that would be necessary in many cases of curved spine, would be simply to place the patient in a horizontal position, and all deformity would promptly be removed. But let it be tried in any severe case, and it would dissipate the assertion to the winds. Nay, more, if his position was true, it would be difficult to conceive how a curvature should ever take place, except in cases connected with diseased vertebrae. It is a well-known fact that horse dealers elevate the heads of horses by compelling them to eat from a high rack, and not allowing them to drop their heads below a certain point, by which means the head becomes permanently elevated, and in some instances so much so that the animal cannot bring his head to the ground; yet he has perfect command of his muscles in the limit assigned to them by the arrangement. Perhaps the doctor would say that the law of muscular action in horses is different from that in man, and may feel that I am comparing a horse "to a curved spine;" but if so, I can only say that both are untrue. If his assertion were true, the sphere of muscular action could not be permanently altered from its natural position, and all his attempts to do so must be for other purposes than believing he can accomplish it.

One point Dr. B. seems determined not to notice, viz., the difference between confining a muscle to a certain sphere of action, and placing it in a position in which it cannot move, and gravely talks as if the latter

was the position advanced by me. Suffer me, however, to correct him on this point also. I wish it distinctly understood, that all my applications for curved spine, are so arranged that not a single muscle is prevented from acting, but only the action confined to certain limits. Every muscle sustaining the vertebral column is allowed to act under the use of the ratchets and corsets, and the patient can change his position at pleasure, and exercise in any manner desired to promote health. How infinitely does this surpass the method of confining them upon the inclined plane, and stretching them for hours, and then liberating them and suffering them to relapse to their former position, by which nothing towards restoration is accomplished.

Dr. Brown's position relative to the chest is so ridiculous, that I thought of passing it over in silence. He asserts that "anatomy has taught that the bony substance of the ribs and vertebræ yields only at their articulations," and that if he is not correct, then I "shall prove myself the discoverer of a new, and before this, unheard of principle, both in physiology and anatomy." I do not claim this distinction, but as the doctor asserts his ignorance of a principle that bones may be altered in their form, he seems hardly excusable.

Dr. B. seems not to notice the difference between an ellipsis and circle, and ridicules the position taken by me, that pressure upon the most convex portions of an elastic ellipsis increases its capacity by making it more circular. Any school boy could correct him on this point, and any "tyro" in medicine would laugh him to scorn were he gravely to assert it not true. That this is the effect of the proper application of the ratchets and corsets, is an established fact, and demonstrated in many hundred cases; and if the discovery is new, and originated with me, it is nevertheless true, and is of the highest practical importance in the treatment of lateral curvatures of the spine. If you were to press upon two sides of a hollow sphere, in which an opening existed for the escape of the atmosphere, the effect would be to lessen the capacity, if any change was produced in its sides, but the opposite effect would be produced upon an ellipsis. This, Dr. B. seems not to know, or if he knew it, he has put forth assertions he knew to be false.

The doctor next shows his unwillingness to comprehend a principle, or understand an argument, by saying that I compared "a fractured femur to a distorted spine." As he is so dull of apprehension, I will make the matter more plain. I had stated that the common corsets and their effects upon the health were too well understood to require a description from me; so, also, was Desault's apparatus for a fractured femur; but because a man in health would be a fool to wear it, it would not follow that he would be so if afflicted with a fractured femur. The argument was, that because persons in health were injured by using improper instruments, when diseased it would not follow that they would not be benefited by instruments adapted to the case.

At this point the doctor seems to lose all patience, and by a sweeping clause denounces the most plain and positive facts in philosophy, physiology and anatomy, as if his medical brethren were bound to take his

assertions without examination. But I ask soberly, if such were the fact, would not the doctor, with the disposition manifested by him, expound them? There can be no doubt on this point. And the fact that he contents himself with assertions and misrepresentations, proves most conclusively the untenable nature of his position.

Another error the doctor has fallen into, which I feel justified in inferring, viz., that because all my cases are not cured, therefore my system must be wrong. I have never advanced the claim, that among the several thousand cases of curved spine that have been treated by me, all were cured; nor would any reasonable man expect it. If the practice of medicine or surgery were to be tried by this rule, under the guidance of the most skilful, in any or all its parts, all would be condemned without distinction. Nor can I hold myself responsible for the improper use of instruments not under my control; and I ought not to be any more answerable than I should be for the improper use of any article of medicine. Several attempts to imitate the corsets used by me have been made; and there would be as much propriety in charging the use of opium upon a physician, when it had been prescribed by an apothecary, as to charge the ill effects of corsets upon me, when not under my direction, and especially when I have not applied them myself.

The doctor claims to have much sympathy, and presents, as a motive for his unfounded assertions, a sense of duty. It may be so, but it is more like the sympathy and duty of the fox watching for his prey, without regard to truth, and should meet with just rebuke. A. ABBE, M.D.

May 10, 1843.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

MAY 24, 1843.

Medical Legislation.—A committee was raised some time last season by the Monroe County, N. Y. Medical Society, to whom was referred the subject of medical legislation. Circulars were addressed to medical gentlemen in different States, to ascertain points like these—"Is there any law in your State regulating the practice of physic and surgery—and if so, what is it?" "If any law in your State, imposing penalties or disabilities upon the quack, has ever existed, has it ever been repealed or abolished; and if so, what influence has such abolishment had upon the increase or decrease of quackery?" Having received twenty letters in answer, besides eleven pamphlets, the committee sum up their doings thus:

"From the facts thus adduced, it appears, that EIGHT of the States have never had any laws regulating the Practice of Medicine; that TEN have abolished all law on the subject; that FOUR only have any existing law, so far as known to us (for from the four following we have received no replies to our circular—viz.: ARKANSAS, ILLINOIS, MICHIGAN, and DELAWARE.) So that EIGHTEEN at least out of the twenty-six States have, at this time,

no laws regulating the Practice of Medicine, nor prohibiting that of Quackery.

"With regard to the benefits to be derived from Legislation, in the matter before us, the testimony here adduced is somewhat discrepant, both as it regards the facts, and the opinions of the witnesses. But one thing is clear, viz.: that Quackery and Patent Nostrums every where abound, despite all law and the severest penalties. It is also equally evident that public opinion will not tolerate penal enactments prohibiting Empiricism. The Committee have, therefore, unanimously come to the following conclusions:

"FIRST—That in the present state of the public mind, all penal or prohibitory enactments are inexpedient.

"SECOND—That it is most conformable to the spirit of our civil institutions, to leave perfect liberty to all to practise Medicine, being amenable only for injury done.

"THIRD—That all Legislation relative to the Practice of Medicine and Surgery, as in all other Arts and Sciences, should only aim to encourage by affording such facilities as may be necessary to its highest prosecution.

"FOURTH—That the important, if not the only remedy against Quackery, is Medical Reform, by which a higher standard of Medical Education shall be secured."

The Committee, Drs. Reid, Backus, and Moore, who appear to have faithfully performed the duty entrusted to them, make the following, among other additional remarks:

"The object of Legislation is the public good. Medical law may be said to have a twofold object: first, the protection of the community against imposition, where health and life are involved; second, the improvement of Medical Science: both aiming at and resulting in the public good. But law is the expression of the public will, without which it can neither be enacted, sustained, nor executed. The written statute is, therefore, a dead letter, whenever the public mind is arrayed against it. And this is pre-eminently the case with regard to the medical law of this State at this time. Empiricism is every where rife, and was never more arrogant, and 'the people love to have it so.' That restless, agitating, agrarian spirit, that would always be levelling down, has so long kept up a 'hue and cry against calomel and the lancet,' that the prejudice of the community is excited against, and their confidence in the Medical Profession greatly impaired—and no law could be enforced against the Empiric, or nostrum vender. Every attempt of the kind would only create a deeper sympathy in their favor, and raise a storm of higher indignation against the Profession. This spirit cannot be controlled by arbitrary legislation. It only makes it, like compressed steam, the more elastic and more certain to explode. It is by seeming to yield, and giving it space, that it becomes quiescent and harmless. A repeal of all penalties and disabilities would take away from the quack his strong ground for appeal to the sympathies of the people."

*Diseases of the Skin.**—An almost endless variety of cutaneous affections are brought under the eye of the physician, for many of which he has

* A Practical and Theoretical Treatise on the Diagnosis, Pathology and Treatment of Diseases of the Skin, arranged according to a natural system of classification, and preceded by an outline of the Anatomy and Physiology of the Skin. By Erasmus Wilson, M.D., &c. &c. Philadelphia. Lea & Blanchard. 1843. 8vo. p. 370.

no certain remedy. Locality, diet, dress, climate, humidity, aridity of the atmosphere, &c., are the direct causes, or exert modifying influences on the diseases of the skin, as perplexing to the sufferer as they are anomalous to the practitioner. Within a few years quite a successful system of quackery has been carried on in this department. Adventurers in health have opened their medicated baths; sold their secretly prepared unctions and lotions; or drugged those who had less sense but more honesty than themselves, till intelligent people begin to perceive that some new action is required, to stop this tide-wave of ignorance, presumption, and offensive charlatanism.

We have been led to these observations by looking over the pages of "*A Practical and Theoretical Treatise on the Diagnosis, Pathology and Treatment of Diseases of the Skin.*" Mention was made of this book some two or three weeks ago, but owing to a constant pressure of other matter, there has since been no good opportunity for speaking of it properly. Without going into the particulars of what the author designates a *natural system of classification*, it only behooves us now to call the attention of our brethren to the fact that a new work, or rather a new edition of an excellent treatise, is now waiting their patronage. It is by Dr. Erasmus Wilson, author of a celebrated and beautifully illustrated work on human anatomy. This one fact is sufficient to show that industry and knowledge have been concerned in the production of the work. The following subjects constitute the chapters, viz.: Anatomy and Physiology of the Skin; Congestive Inflammation of the Dermis; Effusive Inflammation; Suppurative Inflammation; Depositive and Squamous, of the Dermis; Inflammation of the Skin induced by Parasitic Animalcules inhabiting the Dermis; Hypertrophy of the Papillæ of the Dermis; Disorders of the Vascular Tissues; Disordered Sensibility of it, and Disordered Chromatogenous Functions of the Dermis; Diseases of the Suderiparous Glands and of the Sebaceous Diseases of the Hairs and Follicles; Syphilitic Eruptions, &c., followed by a History and Description of the Itch Animalcule, *Acarus Scabiei*; the *Acarus Folliculorum*, &c. &c.

As a whole, it is a very orderly written work, embracing the entire amount of knowledge on diseases of the skin, which could be deemed essential. Those who have not yet availed themselves of it have an opportunity of procuring a guide of character, not perhaps inferior to any extant, and far less expensive than many that might be named.

Poisonous Influences of Lead Pipe.—Some months since a notice was given of the researches of Dr. Dana, of Lowell, on the poisonous effects of lead pipes on potable water, which are deserving the grave consideration of the guardians of the public health. We have wondered that the report of Dr. Dana did not have the effect of inducing some one to devise a substitute for lead pipes, that should be economical and free from dangerous properties. A late discovery in London, that the dogs of her Majesty's kennel sickened and died in consequence of drinking water that flowed through a lead tube, led to vigorous action, although half the inhabitants of that great metropolis may still be suffering from the same cause. This is becoming a serious matter, that requires legislative inquiry—at least so far as the public works now constructing are concerned.

Since the whole story is concentrated in the following analysis, no apology is necessary for introducing it to the attention of the medical reader:—

"The following is the result of an actual experiment with water passing through a pipe made exclusively of lead, without a coating of tin or bees-wax. The first examination was made from a sample of water taken from the source or spring-head before it had entered the leaden pipes, when the specific gravity was found to be 1,000.18. The pint, on evaporation to dryness, yielded 2.37 grains of solid matter. The solid contents of an imperial pint were found to be—

	Grains.
Chloride of sodium, - - - - -	1.54
Chloride of magnesia, - - - - -	0.71
Sulphate of lime, - - - - -	0.128
A trace of carbonic acid, - - - - -	—
Grains, - - - - -	2.378
Excess in the course of analysis. - - - - -	.008

The second examination was made of water taken from the leaden pipes, when the specific gravity was found to be 1000.42. Upon a pint of this water being, as in the former experiment, evaporated to dryness, it yielded two grains of solid matter, viz. :—

	Grains
Carbonate of lead, - - - - -	.164
Organic matter, and traces of chlorides of sodium and magnesium, and sulphate of lime, - - - - -	.038
Grains, - - - - -	.202
Excess in analysis, - - - - -	.002

It has therefore been calculated that every gallon of the water used after passing through the leaden pipes, contains 1.312 grains of the carbonate of lead. Such water, although it might not destroy life immediately, would so affect the constitution as to cause death at no distant period, should its use be habitually continued."

Connecticut Retreat for the Insane.—John S. Butler, M.D., late Physician of the Institution for the Insane at South Boston, has been elected Medical Superintendent of the Retreat for the Insane at Hartford. This will be gratifying intelligence to the friends of Dr. Butler. He has had that kind of practical experience in the management of lunatics, which is essential to the satisfactory discharge of the responsible duties devolving upon the directing medical officer of such an institution. Dr. Butler's ability to meet the high expectations of the trustees, is not doubted, and it is hoped, therefore, that the appointment may prove as happy as it is popular with those who made this selection from a number of candidates equally respectable.

Anniversary of the Medical Society.—It should be kept in recollection by medical gentlemen throughout the Commonwealth, that the annual meeting of the State Society will be held in Boston, on Wednesday, May 31st. This is an occasion that has, for many successive years, brought together a large number of physicians, and the meetings have been alike

agreeable to all. They conduce to harmonious action; establish an acquaintance between members, and give tone and respectability to the Society in the estimation of the community. Medical strangers, even those from the neighboring States, who would enjoy a trip to the city, could not be in Boston at any period better calculated to excite their interest, than on the last Wednesday of May.

Lectures on Homœopathy.—J. G. Rosenstein, M.D., who has recently established himself in Boston, gave the first of a proposed series of eight or ten lectures on the subject of homœopathy at the Temple, on Tuesday evening of last week. This was the first public discourse, we believe, ever given in Massachusetts, in favor of the doctrine, or in explanation of its principles, although there have been some against it. No one could object to the manner in which Dr. Rosenstein spoke of non-believers; all objectors were treated with courtesy, however much they might cavil at his course of reasoning. Some parts of the lecture were exceedingly ingenious—and simply as an English composition, would compare with the best specimens of home scholarship. With regard to the ultimate destiny of homœopathy in New England, it is impossible to predict. Almost every one with whom we converse says that it is dying—the day of its influence is past; and yet the infinitesimal practitioners appear to be increasing, if not the number of their patients.

New Anatomical Model.—Mr. Gompertz, a medical student, exhibited, at a late meeting of the Medical Society, a specimen of an anatomical model which he had constructed for the purpose of studying anatomy. The model consists of all the soft parts, including even the cutaneous nerves. The basis is the natural skeleton. The muscles are formed of red calico, stuffed to the natural size; the nerves are made of white leather, and the arteries and veins of red and blue calico stuffed. The resemblance to nature is very striking, and from the circumstance of every part being movable, anatomy may be studied with tolerable accuracy, though of course no invention can ever supersede the necessity of actual dissection. The model is ingenious.—*London Lancet.*

TO CORRESPONDENTS.—Dr. Deane's case of muscular spasms, Dr. Blake's case of lesion of the duodenum, Dr. Ellsworth's operation for contraction from burn, Dr. North's Analysis of Congress Spring water, and Dr. Capen's letter to Dr. Blatchford, have been duly received.

MARRIED.—At Woburn, May 16th, Lewis Williams, M.D., of Pomfret, Conn., to Miss Clara C., youngest daughter of the late Col. B. F. Baldwin, Esq., of W.—In Cincinnati, Dr. A. Spottswood Dandridge, of Jefferson Co., Va., to Martha Eliza Pendleton.

DIED.—At New York, after a protracted illness, Daniel L. Peixotto, M.D., formerly president of the Medical Society of New York, 44.

Number of deaths in Boston, for the week ending May 30, 37.—Males, 20; Females, 17. Stillborn, 1. Of consumption, 4—drowned, 3—cachexia, 1—worms, 1—disease of the heart, 1—croup, 1—old age, 1—infantile, 3—decline, 2—hemorrhage, 1—hooping cough, 2—disease of the lungs, 1—teething, 1—convulsions, 1—marasmus, 1—child-bed, 1—smallpox, 1—brain fever, 1—sudden, 1—scrofula, 1—dropy on the brain, 1—enlargement of the heart, 1—chronic diarrhoea, 1—decay of nature, 1—unknown, 1.

Under 5 years, 13—between 5 and 20 years, 5—between 20 and 50 years, 15—over 50 years, 5.

Frequency of Second Attacks of Smallpox.—M. Serre states, that, from the observation of 1500 cases of smallpox, he has arrived at the conclusion that secondary attacks of smallpox are as common after smallpox itself as after vaccination; that, in fact, vaccination has the simple effect of preventing a first attack of smallpox, being merely of the same efficacy in that respect as an attack of smallpox itself.—*Dublin Journal*.

Case of Demonomania.—A woman about five and twenty, of a strong constitution, and married to a weak and delicate man, became violently hysterical, and was subject to nocturnal visions of a kind most calculated to alarm her. She was fully convinced that a beggar whom she had repulsed one day, and who had threatened to bewitch her, had executed this disastrous project. She thought that she was possessed by the devil, who took various forms, and sometimes sang like a bird, at others uttered mournful sounds, and sometimes piercing cries which frightened her excessively. She remained for several months in her bed, uninfluenced by all the advice given her, and by all the consolations of friendship. The vicar of that place, an enlightened man of a mild and persuasive character, gained an ascendant over her mind, and succeeded in making her leave her bed, and in persuading her to resume her domestic occupations, and even to dig in the garden, and use out-of-door exercises extremely useful to her body; all followed by the best effects, and by a cure which lasted three years. But the good vicar now died, and was succeeded by an ex-monk, very superstitious, and of very limited capacity. He gave entire belief to the visions of the patient, did not doubt in the least but that she was possessed by the devil, continually repeated exorcisms, and kept her strictly shut up. The consequences of such absurd prejudices are not difficult to foresee.—*Pinel sur l'Aliénation Mentale*.

Femoral Hernia.—At a late meeting of the London Medical Society, Mr. Pilcher, the president, detailed some particulars of a case of femoral hernia, which terminated fatally, and which was observed during life by a very prominent condition of the os pubis, and an exostosis of the upper part of the thigh-bone. The usual symptoms of hernia were unequivocal, and a very careful examination of the parts in which hernia is usually situated was made. No kind of tumor could be detected in the femoral region. After death, however, a small femoral hernia was found, and it was then discovered that the small portion of gut which was strangulated, had lain in a hollow formed by the pubis and exostosis, as mentioned above.—*Lon. Lancet*.

Case of Volvulus removed by Injections.—At the same meeting Mr. Pilcher also related a case of volvulus in a child to which he was called after all the usual remedies for the removal of the disease had been ineffectually employed. Recollecting the beneficial effect of an injection in a case of this kind some years before, he recommended that as much thin gruel as could be thrown up into the bowel should be injected by the common injection-syringe. The quantity thrown up was very large, and the bowels were much distended by it. The effect was almost immediate and quite decided, the obstruction gave way, and the patient recovered.—*Id.*